#### PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents AUG 2 3 2007 P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriately all further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 20995 7590 05/21/2007 Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. KNOBBE MARTENS OLSON & BEAR LLP 2040 MAIN STREET FOURTEENTH FLOOR **IRVINE, CA 92614** Adam J. Gilbert (Depositor's name 08/23/2007 WASFAW2 00000002 10799337 odo- ACT (Signature 700.00 OP (Date 01 FC:2501 August 20, 2007 የሰል ሰለ በወ FC:1504 APPLICATION NO. FIRST NAMED INVENTOR **FILING DATE** ATTORNEY DOCKET NO. CONFIRMATION NO. 10/799,337 03/12/2004 Dean S. Irwin PMEDEX.17CP1C 6234 TITLE OF INVENTION: TREATMENT OF SKIN DISORDERS WITH UV LIGHT AND COOLING APPLN. TYPE SMALL ENTITY **ISSUE FEE DUE PUBLICATION FEE DUE** PREV. PAID ISSUE FEE **TOTAL FEE(S) DUE DATE DUE** nonprovisional YES \$700 \$300 \$0 \$1000 08/21/2007 **EXAMINER ART UNIT** CLASS-SUBCLASS FARAH, AHMED M 3735 606-090000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list ı Knobbe, Martens, (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, 2 Olson & Bear, LLP (2) the name of a single firm (having as a member a PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) PHOTOMEDEX Carlsbad, California 4a. The following fee(s) are submitted: 4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) Issue Fee A check is enclosed. Payment by credit card. Form PTO-2038 is attached. Publication Fcc (No small entity discount permitted) The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 11-1410 (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Date August 20, 2007 Authorized Signature

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Typed or printed name Adam J. Gilbert

Registration No. 59.967

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AUG 2 3 2007

# ISSUE FEE TRANSMITTAL LETTER

Applicant

: Dean S. Irwin

App. No.

: 10/799,337

Filed

March 12, 2004

For

TREATMENT OF SKIN

DISORDERS WITH UV LIGHT AND

COOLING

Art Unit

3735

Conf. No.

6234

Class/Sub-Class

606-090000

Examiner

Ahmed M. Farah

### CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

August 20, 2007

(Date)

Oda Att

Adam Gilbert, Reg. No. 59,967

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Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

### Dear Sir:

Enclosed for filing is the Issue Fee for the above-identified application:

- (X) Form PTOL-85.
- (X) A check in the amount of \$1,000 to cover the Total Fee Due is enclosed.
- (X) Return prepaid postcard.

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Adam Gilbert

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Registration No. 59,967 Attorney of Record Customer No. 20,995

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